

Long-term stroke death rates are higher among Black Medicare patients

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A long-term look at Medicare patients shows that Black patients who have an ischemic stroke (blocked blood flow to the brain) die at a higher rate than white patients, even after accounting for preexisting health conditions, according to preliminary research to be presented at the American Stroke Association's International Stroke Conference 2021.

"So much of what we know is limited to the early or acute phase—the first two weeks after a stroke," said lead study author Judith H. Lichtman, Ph.D., M.P.H., professor and chair of the department of epidemiology at the Yale School of Public Health in New Haven, Connecticut. "When you have a stroke, it's not just about the acute event, it's about the early recovery period to secondary prevention visits that affect your long-term chances of survival."

Researchers analyzed data on 744,044 Medicare beneficiaries (ages 65 and older) who had been treated at U.S. hospitals for [ischemic stroke](#) between 2005 and 2007. Overall, 85.6% were white, 9.9% were Black and 4.5% were of other races or ethnic groups. Black patients had higher

rates of kidney failure, dementia and diabetes. Atherosclerosis and chronic obstructive pulmonary disease (COPD) were more common in white patients.

Patients were followed over a 10-year period, and analysis of the data found:

- Overall, the death rate was about 75%. Black patients had the highest death rate at 76.4%, followed by whites at 75.4%; and the death rate for those of other races or other ethnic groups was 70.3%.
- Even after adjusting for differences in preexisting health problems, the risk of death within 10 years after [stroke](#) was about 4% higher for Black patients than white patients. However, the stroke death risk was about 8% lower for those of other races.
- Importantly, within the first year after hospital discharge for ischemic stroke, the death rate for Black patients started to climb slightly in comparison to whites and other races, and these differences continued over the decade.

"These are racial differences in long-term stroke survivorship, and these differences start within the first year after a stroke," Lichtman said. "We need to take a closer look at the recovery period and think about how we can optimize secondary prevention and post-stroke care for everybody. Stroke care during the first year after a stroke plays an important role in the long run."

Future research will need to investigate the reasons behind these differences in death rates among Black patients and white patients. "Currently, much of the focus is on the acute stroke event, itself, yet we need to find out more—are there [racial differences](#) using rehab services, are some people not seeing neurologists and getting follow up care?" Lichtman said. "Stroke is an acute event, but it's

just as important to focus on early follow-up care that will support patients for better long-term outcomes and survival."

Provided by American Heart Association

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